

**DOMESTIC
NONPROFIT CORPORATION**

STATE OF MAINE

**APPOINTMENT OF REGISTERED AGENT
and REGISTERED OFFICE**

(Name of Corporation)

Filing Fee \$5.00

Deputy Secretary of State

A True Copy When Attested By Signature

Deputy Secretary of State

Pursuant to 13-B MRSA §305.1, the undersigned corporation executes and delivers for filing the following appointment of **registered** agent and registered office, authorized by a resolution duly adopted by the board of directors:

FIRST: The name and registered office of the registered agent who must be a Maine resident, whose address is identical with the registered office; or a corporation, domestic or foreign, profit or nonprofit, having an office identical with such registered office:

(name)

(physical location - street (not P.O. Box), city, state and zip code)

(mailing address if different from above)

DATED _____

*By _____
(signature)

(type or print name and capacity)

*By _____
(signature)

(type or print name and capacity)

(additional signature may be required on back of form)

THE FOLLOWING SHALL BE COMPLETED BY THE REGISTERED AGENT UNLESS THIS DOCUMENT IS ACCOMPANIED BY FORM MNPCA-18 (§304.3.).

The undersigned hereby accepts the appointment as registered agent for the above-named nonprofit corporation.

REGISTERED AGENT

DATED _____

(signature)

(type or print name)

For Registered Agent which is a Corporation

Name of Corporation _____

By _____
(authorized signature)

(type or print name and capacity)

*This document **MUST** be signed by

(1) the **Clerk or Secretary** OR

(2) the **President** or a vice-pres. **together with the Secretary** or an ass't. sec., or a 2nd certifying officer OR

(3) if no such officers, then a majority of the **Directors** OR

(4) if no such directors, then the **Members**.

**SUBMIT COMPLETED FORMS TO: CORPORATE EXAMINING SECTION, SECRETARY OF STATE,
101 STATE HOUSE STATION, AUGUSTA, ME 04333-0101**